

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator John H. Hendrix Corporation	Well API No. 30-035-12066
Address 223 W.Wall, Suite 525, Midland, TX 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator ancel Birkel + Watzel

II. DESCRIPTION OF WELL AND LEASE

Lease Name Parks "A"	Well No. 3	Pool Name, Including Formation Blinbry	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter P	660	Feet From The South Line and	660	Feet From The East Line
Section 14	Township 22-S	Range 37-E	NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Northern Natural Gas	Address (Give address to which approved copy of this form is to be sent) 223 Dodge Street, Omaha, NE 68102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?
P 14 22S 37E	Yes 1-19-89

If this production is commingled with that from any other lease or pool, give commingling order number:

PC-752

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input checked="" type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded -	Date Compl. Ready to Prod. 1-11-89		Total Depth 7365'		P.B.T.D. 6053'			
Elevations (DF, RKB, RT, GR, etc.) 3333' GR	Name of Producing Formation Blinbry		Top Oil/Gas Pay		Tubing Depth 5434'			
Perforations 5537, 43, 65, 73, 94, 5603, 10, 17, 21, 47, 60, 64, 85, 5702, 08, 15, 23, 50, & 58'	TUBING, CASING AND CEMENTING RECORD		DEPTH SET 5434		SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	NA							
	NA							
	2-3/8"							

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 1-14-89	Date of Test 1-17-89	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 180	Casing Pressure Pkr.	Choke Size 16/64"
Actual Prod. During Test	Oil - Bbls. 33	Water - Bbls. 25	Gas - MCF 189

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Ronnie H. Westbrook
Signature
Ronnie H. Westbrook-Vice Pres.
Printed Name
1/24/89 **(915) 684-6631**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN 30 1989**

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.